PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

140320-1/400

GERA: 0106

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
F	OTAL CLAIM	IS		(Column 1)		(Column 2)		TYPE		OF			
			42	42				RATE	FEE		RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.0	0 OF	BASIC FEI	770.00	
TOTAL CHARGEABLE CLAIMS			42 11	42 minus 20=		. 55		XS _. 9=		OF	X\$18=	3.96	
!	DEPENDENT				/		X43=		OR	X86=	86		
М	ULTIPLE DEPE	ENDENT CLAIM I	PRESENT	·				+145=	1.	OR			
*	f the differenc	ce in column 1 is	less than	ess than zero, enter "0" in column 2			L	TOTAL	 	OR		125	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
	T	(Column 1)		(Column 2) (Column 3				SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	ŀ	X\$ 9=		OR	X\$18=		
	Independent	ENTATION OF M	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								+145= TOTAL		ا ہے!	TOTAL		
	•	(Column 1)		(Colum	n 2)	(Column 3)	Al	DDIT. FEE	<u> </u>	JOR	ADDIT. FEE		
AMENDMENT B		CLAIMS		HIGHE	ST		Г	_	ADDI-	ו ר		4551	
		REMAINING AFTER AMENDMENT		NUMB PREVIOL PAID F	ŲSLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	· .	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	F	X43=	٠.	1_1	X86≃		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEI	PENDENT (CLAIM		┢	7,10-		OR	700-		
							Ŀ	+145=		OR	+290=		
			•	•			· AĎ	TOTAL DIT. FEE		OR ,	TOTAL ADDIT, FEE	N Y	
•		(Column 1)		(Column	1 [.] 2)	(Column 3)	•					• .	
ار	`	CLAIMS REMAINING		HIGHES	ST	PRESENT	Г		ADDI-	ır	· ·	ADDI-	
MENDMEN		AFTER AMENDMENT	.a. (1	PREVIOU PAID FO	ISLY	EXTRA	'	RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	 	(\$ 9=	7 12 12	OR	X\$18=	FEE	
	Independent	*	Minus	***		=	-						
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43=	· ·	OR	X86=		
. 16	the estimate testimate	nn 1 in leas the					1+	145=		OR	+290=		
- H	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR .	TOTAL		
т-п	the "Highest Nur	nber Previously Pai ber Previously Paid	d For IN THIS	S SPACE is le	ess than	3 enter *3 * .		OIT. FEE		. 4	DDIT. FEE L	- 1	
	J	3-2- , . Cic	. 2. (10ta) Of	dependent	i ia nie II	ngriesi number i	ound	niure appr	opriate box	iu coini	mn 1.		